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7590 06/08/2004

Alan H. Thompson
 Deputy Lab Counsel for Intellectual Property Law
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 Livermore, CA 94551



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April Masluk	(Depositor's name)
April Masluk	(Signature)
8-23-04	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/043,449	01/10/2002	Ai Quoc Pham	IL-10822	6469

TITLE OF INVENTION: HIGH POWER DENSITY SOLID OXIDE FUEL CELLS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/08/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
MAPLES, JOHN S	1745		429-033000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 John P. Wooldridge

2 L.E. Carnahan

3 Alan H. Thompson

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Regents of the University of California Oakland, CA (USA)

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies Ten (10) \$30.00 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0695 (enclose an extra copy of this form).

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(Authorized Signature) April Masluk (Date) 8-23-04

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